1947 Page 2 Attorney Docket No. POWER OF ATTORNEY As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Walter A. Hackler Howard R. Lambert Robert J. Baran Registration No. 27,792 Reg. No. 27,206 Reg. No. 25,806 Send Correspondence to: Martin A. Voet Reg. No. 25,802 Walter A. Hackler 2372 S.E. Bristol, Suite B Santa Ana Heights, CA 92707 U.S.A. Direct Telephone Calls to: Walter A. Hackler (714) 851-5010 Full Name of Sole or First Inventor: K. Roger Aoki Date Signed: Inventor's Signature: 9/22/93 Citizenship: Residence (City, State and/or Country): 25472 Earhart Road, Laguna Hills, CA 92653 USA Post Office Address (Street, City, State, Zip Code, Country): Full Name of Second Joint Inventor (if any): Michael W. Grayston Date Signed: Second Inventor's Signature: 9/28/93 Middle W. Warth Citizenships Residence (City, State and/or Country): USA 12 Mandarin, Irvine, CA 92714 Post Office Address (Street, City, State, Zip Code, Country): full Name of Third Joint Inventor (if any): Steven R. Carlson bate Signed: Third Importage signature: Citizenships Residence (City, State and/or Country): 29991 Happy Sparrow Lane, Laguna Niguel, CA 92677 Post Office Address (Street, City, State, Zip Code, Country):

1947 Attorney Docket No. Page 3 Full Name of Fourth Joint Inventor (if any): Judith M. Leon Fourth Inventor's Signatures Residence (City, State and/or Country): 29992 Running Deer Lane, Laguna Niguel, CA 92677 USA Post Office Address (Street, City, State, Zip Code, Country): Full Name of Fifth Joint Inventor (if any): Fifth inventor's Signature: Date Signed: Residence (City, State and/or Country): Citizenship; Post Office Address (Street, City, State, Zip Code, Country): Full Name of Sixth Joint Inventor (if any): CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT OPTIONAL SECTION = CAPACITY CLAIMED BY SIGNER Though statute does not require the Notary to fill in the data below, doing so may prove invaluable to persons relying on the document. ☐ INDIVIDUAL CORPORATE OFFICER(S) personally appeared TITLE(S) personally known to me - OR - I proved to me on the basis of satisfactory evidence PARTNER(S) LIMITED GENERAL to be the person(s) whose name(s) is/are ATTORNEY-IN-FACT subscribed to the within instrument and acknowledged to me that he/she/they executed TRUSTEE(S) the same in his/her/their authorized ☐ GUARDIAN/CONSERVATOR capacity(les), and that by his/her/their OTHER: JACQUELYN S, PRITZ signature(s) on the instrument the person(s), COMPT & WELL or the entity upon behalf of which the Richary Public — Catifa ORANGE COUNTY person(s) acted, executed the instrument. omm. Expires MAR 17, 1997 SIGNER IS REPRESENTING: WITNESS my hand and official seal. NAME OF PERSON(S) OR ENTITY(IES)

-PAGE 17/26 * RCVD AT 9/28/2004 3:06:34 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/3 * DNIS:8729306 * CSID:9494501765 * DURATION (mm-ss):09-02

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